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APR 2 3 2019

RECEIVED

NEW HAMPSHIRE DEPARTMENT OF STATE

2		STATE OF NEW HAMPSHIKE
		2019 Statement of Income and Expense
		for LOBBYISTS
	••	(RSA Chapter 15)
	DI FACE DDINT	· · · · · · · · · · · · · · · · · · ·

1. Name of Lobbyi	ist(s) <u>Martha</u>	a Wood						
II. Name of lobbyi	ist's partnersh	ip, firm or corp	oration, if ar	ıy:				
		nd Annuity A						
(1	Name of partners	ship, firm or corpo	ration)			· -		
730 Third .	Avenue	N	lew York	_	NY	10017		
Business Address:	(Street)	(Fown/City)	-	(State)	(Zip Code)		
(212) 916 - 62	32	()		e-mail mlwood@TIAA.org				
. (Telephone	e)	· · · · · · · · · · · · · · · · · · ·	(Fax)			· · · · · · · · · · · · · · · · · · ·		
reportable expens	e transactions	which are not a	ttributable t	o any one client	t).	nay file a separate report fo		
All reportable t	ransactions occ	curring in the mo	nths prior to t	the reporting dat	e relative to	the following client:		
		ers Insuranc				•		
<u>OR</u>	(Full Name	of Client as it app	ears on the Lo	bbyist Registration	ı Form)			
		the lobbyist (incl	uding the lob	byist's family), (or the lobbyi	ng firm listed below which as		
IV. Date of Report Reports cover: acti	•	April 24, 2019 X		•	July 31, 2019			
		October 30, 2019 activity from 7/1/19 to 9/30/19			January 29, 2020 activity from 10/1/19 to 12/31/19			
V. There have be If this box is checke Concord, NH 0330	ed, complete ju					the last report. XI State House, Room 204.		
VI. Check if addit	ional reports :	are attached:		•				
☐ If you have rec	eived fees or n	nade expenditure	s, you must fi	ile Addendum A	- Fees and	Expenses		
☐ If you have pai Expense Reimburse		m or reimbursed	expenses, yo	u must file Add	endum B– f	Report of Honorariums or		
☐ If you, your fir	m, or your fam	ily has made pol	itical contribu	utions, you must	file Adden	dum C- Political Contributio		
and complete to the	5, RSA 15-B, F	ISA 14-C and RS owledge and beli		ereby swear or a	. 1	e foregoing information is tru		
(Signature of lobby	·		_		- ' (E	Pate)		
Martha Wood						•		
(Print Name of Joh								